

MONTANA EMS DATA COLLECTION & HOSPITAL HAND OFF INFORMATION												
GENERAL CALL INFORMATION								RESPONSE				
AGENCY				DATE			ODOMETER / MILEAGES		INCIDENT TIMES			
DISPATCH COMPLAINT						BEGINNNING				PSAP		
PATIENT NAME				AGE			SCENE				NOTIFIED	
ADDRESS				ZIP CODE			DESTINATION				EN ROUTE	
ECP CREW	1	2	3	DRIVER			LOADED MILES				ON SCENE	
SCENE										AT PATIENT		
ADDRESS				CITY			ZIP CODE				DEPART SCENE	
LOCATION TYPE				OTHER EMS					AT DESTINATION			
OTHER RESPONDERS										BACK IN SERVICE		
CPR	INITIATED		TERMINATED		ARREST TIME				BACK AT HOME			
TRAUMA	CAUSE									CANCELLED		
PATIENT INFORMATION												
CHIEF COMPLAINT						SECONDARY COMPLAINT						
PRIMARY SYMPTOM						ASSOCIATED SYMPTOMS						
ASSESSMENTS												
SKIN		PUPILS		ALLERGIES				HISTORY				
MEDS												
INTERVENTIONS (VITALS)												
TIME	AVPU	RESP	PULSE	BP	PAIN	STROKE	O2%	CO2%	GLUC	TEMP		
INTERVENTIONS (PROCEDURES & MEDICATIONS)												
TIME	PROVIDER	PROCEDURE/MED		DOSE	ROUTE	RESPONSE	ATTEMPTS	SUCCESS	GCS	COMP		
NOTES												
DESTINATION & BILLING												
FACILITY					PATIENT LEFT IN CARE OF:							